

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT** ▼Example: If typing, type  
over the lines

Republican Party of Wisconsin

ADDRESS (number and street)

148 E. Johnson Street

☐Check if different  
than previously  
reported. (ACC)

Madison

WI

53703

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00074450

3. IS THIS  
REPORT☒NEW  
(N)**OR**☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report (Q1)☐July 15  
Quarterly Report (Q2)☐October 15  
Quarterly Report (Q3)☐January 31  
Quarterly Report (YE)☐July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☒

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

06

01

2007

through

06

30

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Cathy Stepp

Signature of Treasurer

Electronically Filed by Cathy Stepp

Date

07

19

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Republican Party of Wisconsin

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2007</span>		4485.41
(b) Cash on Hand at Beginning of Reporting Period .....	61686.42	
(c) Total Receipts (from Line 19) .....	71244.20	649646.62
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	132930.62	654132.03
7. Total Disbursements (from Line 31) .....	70277.85	591479.26
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	62652.77	62652.77
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	27700.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Republican Party of Wisconsin

Report Covering the Period:

From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	7

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	34665.00	164965.00
(i) Itemized (use Schedule A) .....	32902.44	425657.68
(ii) Unitemized .....	67567.44	590622.68
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	0.00	0.00
(b) Political Party Committees .....	2500.00	48250.00
(c) Other Political Committees (such as PACs) .....	70067.44	638872.68
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤		
12. Transfers From Affiliated/Other Party Committees .....	0.00	1569.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	1176.76	9204.94
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	71244.20	649646.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	71244.20	649646.62

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	1221.09	11948.63
(ii) Non-Federal Share.....	4593.62	44949.68
(b) Other Federal Operating Expenditures.....	17368.09	173471.90
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	23182.80	230370.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	7000.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	2500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	2500.00
29. Other Disbursements.....	500.00	1500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	46595.05	350109.05
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	46595.05	350109.05
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	70277.85	591479.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	65684.23	546529.58

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	70067.44	638872.68
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	2500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	70067.44	636372.68
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	18589.18	185420.53
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	1176.76	9204.94
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	17412.42	176215.59

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A.** Full Name (Last, First, Middle Initial)  
 Mark Aschliman  
 Mailing Address 3970 N Oakland Ave

City State Zip Code  
 Shorewood WI 53211

FEC ID number of contributing federal political committee.

C

Name of Employer  
SelfOccupation  
Surgeon

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 2 8 / 2 0 0 7

Transaction ID: SA11A1.28773

Amount of Each Receipt this Period

500.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
 Steven Bartelt  
 Mailing Address 2510 N Pasadena Blvd

City State Zip Code  
 Milwaukee WI 53226-1948

FEC ID number of contributing federal political committee.

C

Name of Employer  
Marcus Corp.Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 6 / 2 0 0 7

Transaction ID: SA11A1.28774

Amount of Each Receipt this Period

250.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
 John Beck  
 Mailing Address 4107 W Rudella Rd

City State Zip Code  
 Mequon WI 53092

FEC ID number of contributing federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 8 / 2 0 0 7

Transaction ID: SA11A1.28776

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

1250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) James Bell		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 1 / 2 0 0 7
Mailing Address 3900 W Lemont Blvd		<b>Transaction ID:</b> SA11A1.28779
City State Zip Code Mequon WI 53092	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Robert W. Baird & Company	Occupation Exec. V.P.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Gordon Boucher		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 4 / 2 0 0 7
Mailing Address 4585 N Sawyer Road		<b>Transaction ID:</b> SA11A1.28783
City State Zip Code Oconomowoc WI 53066	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Self Employed	Occupation Auto Dealer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Robert Brumder		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 8 / 2 0 0 7
Mailing Address 6845 N Hwy 83		<b>Transaction ID:</b> SA11A1.28785
City State Zip Code Hartland WI 53029	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 51

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. Anthony Bryant

Mailing Address P.O. Box 466

City

Waukesha

State

WI

Zip Code

53187

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Century Fence CompanyOccupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	7

Transaction ID: SA11A1.28786

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. John Bryson

Mailing Address 7272 N. Bridge Lane

City

Fox Point

State

WI

Zip Code

53217

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VaportekOccupation  
Retired President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	6	/	2	0	0	7

Transaction ID: SA11A1.28787

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Joan Burrell

Mailing Address 3045 Lakota Pl

City

La Crosse

State

WI

Zip Code

54601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	1	/	2	0	0	7

Transaction ID: SA11A1.28788

Amount of Each Receipt this Period

150.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

2150.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Mark Cullen		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 8 / 2 0 0 7
Mailing Address 220 Jefferson St		<b>Transaction ID:</b> SA11A1.28793
City Janesville	State WI	Zip Code 53547
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer J.P. cullen, Inc.	Occupation Contractor	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Wolfgang Dörner		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address PO Box 655		<b>Transaction ID:</b> SA11A1.28794
City Hartland	State WI	Zip Code 53029
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Information requested	Occupation Information requested	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Kenneth Foster		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 5 / 2 0 0 7
Mailing Address 4564 Broadway St		<b>Transaction ID:</b> SA11A1.28801
City Manitowoc	State WI	Zip Code 54220
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Information requested	Occupation Information requested	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**SUBTOTAL** of Receipts This Page (optional) .....

5550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A.** Full Name (Last, First, Middle Initial)  
Michael Hansen  
Mailing Address 2033 Ludington Ave

City State Zip Code  
Wauwatosa WI 53226

FEC ID number of contributing federal political committee.

C

Name of Employer  
Wisconsin Coach LinesOccupation  
CPA/Bus Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 0 7

Transaction ID: SA11A1.28807

Amount of Each Receipt this Period

1000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
James Heller  
Mailing Address PO Box 240181

City State Zip Code  
Milwaukee WI 53224

FEC ID number of contributing federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 2 / 2 0 0 7

Transaction ID: SA11A1.28808

Amount of Each Receipt this Period

2000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
James Heller  
Mailing Address PO Box 240181

City State Zip Code  
Milwaukee WI 53224

FEC ID number of contributing federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 2 / 2 0 0 7

Transaction ID: SA11A1.28809

Amount of Each Receipt this Period

2000.00

Contribution

SUBTOTAL of Receipts This Page (optional) ▶

5000.00

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)

Thomas Jeffris

Mailing Address P.O. Box 650

City State Zip Code  
 Janesville WI 53547

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gere Corporation

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 2 5 / 2 0 0 7

Transaction ID: SA11A1.28813

Amount of Each Receipt this Period

250.00

Contribution

B. Full Name (Last, First, Middle Initial)

Mary Kohler

Mailing Address PO Box 897

City State Zip Code  
 Sheboygan WI 53082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Windway Capitol Corp

Occupation  
Public Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 2 1 / 2 0 0 7

Transaction ID: SA11A1.28815

Amount of Each Receipt this Period

5000.00

Contribution

C. Full Name (Last, First, Middle Initial)

Terry Kohler

Mailing Address 630 Riverfront Drive

City State Zip Code  
 Sheboygan WI 53082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Windway Capital Corp

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 2 1 / 2 0 0 7

Transaction ID: SA11A1.28816

Amount of Each Receipt this Period

5000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

10250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A.** Full Name (Last, First, Middle Initial)  
Edith Kraus  
Mailing Address 2701 Sunset Blvd #1

City State Zip Code  
Stevens Point WI 54481

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 9 / 2 0 0 7

Transaction ID: SA11A1.28817

Amount of Each Receipt this Period

125.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
David Lenz  
Mailing Address PO Box 620994

City State Zip Code  
Middleton WI 53562-0994

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
North Central Management  
Inc

Occupation  
Dev. & Mgmt.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 0 7

Transaction ID: SA11A1.28821

Amount of Each Receipt this Period

600.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Fred Luber  
Mailing Address 777 N Prospect

City State Zip Code  
Milwaukee WI 53202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Super Steel Products

Occupation  
Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 4 / 2 0 0 7

Transaction ID: SA11A1.28823

Amount of Each Receipt this Period

1000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1725.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) P Mahoney		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 7
Mailing Address 9731 N. Hilltop Lane 29w		<b>Transaction ID:</b> SA11A1.28824
City <u>Mequon</u>	State <u>WI</u>	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <u>C</u>	Zip Code 53092	Contribution
Name of Employer Park State Bank	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Stephen McGuire		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 7
Mailing Address 2810 East Menlo Blvd		<b>Transaction ID:</b> SA11A1.28827
City <u>Shorewood</u>	State <u>WI</u>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <u>C</u>	Zip Code 53211	Contribution
Name of Employer Associated Bank	Occupation Banker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) David Morris		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 7
Mailing Address 832 Country Club Lane		<b>Transaction ID:</b> SA11A1.28830
City <u>Onalaska</u>	State <u>WI</u>	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <u>C</u>	Zip Code 54650	Contribution
Name of Employer Self Employed	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

A. Arthur Nesbitt

Mailing Address 233 W Milwaukee Ave #103

City State Zip Code  
 Fort Atkinson WI 53538

FEC ID number of contributing federal political committee.

C

Name of Employer  
Nasco Intl IncOccupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 9 / 2 0 0 7

Transaction ID: SA11A1.28831

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

B. John Parker

Mailing Address 1380 W Wisconsin Ave Apt 117

City State Zip Code  
 Oconomowoc WI 53066

FEC ID number of contributing federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 2 6 / 2 0 0 7

Transaction ID: SA11A1.28832

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

C. Ralph Prescott

Mailing Address 1889 Maple Heights Beach

City State Zip Code  
 Chilton WI 53014

FEC ID number of contributing federal political committee.

C

Name of Employer  
Information requestedOccupation  
Information requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 2 8 / 2 0 0 7

Transaction ID: SA11A1.28834

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional) .....

1250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 51

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Eric Schumann Mailing Address 7312 Douglas Ave Box 396 City State Zip Code Racine WI 53402 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Merit Gear Occupation Gear Maker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.28839 Amount of Each Receipt this Period 200.00 Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Barbara Smith Mailing Address 3222 E Hampshire Ave City State Zip Code Milwaukee WI 53211-3118 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.28842 Amount of Each Receipt this Period 500.00 Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) Robert Spindell Mailing Address 1626 North Prospect Avenue City State Zip Code Milwaukee WI 53202 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 940.00		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.28844 Amount of Each Receipt this Period 940.00 Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1640.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Gilbert Stannard Mailing Address PO Box 288 City Ephraim State WI Zip Code 54211 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 0 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.28845 Amount of Each Receipt this Period 250.00 Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Jack Steinhilber Mailing Address 5730 I Ah May Tah Rd City Oshkosh State WI Zip Code 54901 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 8 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.28846 Amount of Each Receipt this Period 250.00 Contribution
<b>C.</b> Full Name (Last, First, Middle Initial) Joseph Steuer Mailing Address 2900 14th Street N City Naples State FL Zip Code 33940 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer N/A Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 4 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.28847 Amount of Each Receipt this Period 200.00 Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A.**

Full Name (Last, First, Middle Initial)

Rita Stilin

Mailing Address 72303 Pufal Rd

City

High Bridge

State

WI

Zip Code

54846

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
North Country Lumber

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 8 / 2 0 0 7

Transaction ID: SA11A1.28848

Amount of Each Receipt this Period

900.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

900.00

**TOTAL** This Period (last page this line number only) .....

34665.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** ALTRIA GROUP INC. POLITICAL ACTION COMMITTEE

Mailing Address 120 Park Avenue

City

New York

State

NY

Zip Code

10017

FEC ID number of contributing  
federal political committee.

**C** C00089136

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 6 / 2 0 0 7

Transaction ID: SA11C.28852

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**B.** WYETH GOOD GOVERNMENT FUND

Mailing Address FIVE GIRALDA FARMS

City

MADISON

State

NJ

Zip Code

07940

FEC ID number of contributing  
federal political committee.

**C** C00115303

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 7

Transaction ID: SA11C.28853

Amount of Each Receipt this Period

1500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

2500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 19 / 51

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A.** Full Name (Last, First, Middle Initial)

Guardian

Mailing Address PO Box 95101

City State Zip Code  
 Chicago IL 60694

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

871.23

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 1 3 / 2 0 0 7

Transaction ID: SA15.28772

Amount of Each Receipt this Period

871.23

Refund for overpmt of den-  
tal insurance

**B.** Full Name (Last, First, Middle Initial)

Sherry Schultz

Mailing Address 1418 Pleasure Drive

City State Zip Code  
 Madison WI 53704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RPW

Occupation  
Coordinator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1527.65

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 1 / 2 0 0 7

Transaction ID: SA15.28838

Amount of Each Receipt this Period

305.53

COBRA reimbursement

**SUBTOTAL** of Receipts This Page (optional) .....

1176.76

**TOTAL** This Period (last page this line number only) .....

1176.76

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 51

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

## **A. Advantage**

Mailing Address 1611 N. Kent Street, STE 905

City State Zip Code  
Arlington VA 22209

Purpose of Disbursement  
Automated calls - not FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.28769

Date of Disbursement

/   /

Amount of Each Disbursement this Period

886.82

## **B. American Express Merchant Services**

Mailing Address PO Box 53852

City State Zip Code  
Phoenix AZ 85072-3852

Purpose of Disbursement  
Credit card processing fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.28692

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4.50

## **C. American Express Merchant Services**

Mailing Address PO Box 53852

City State Zip Code  
Phoenix AZ 85072-3852

Purpose of Disbursement  
Credit card processing fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.28694

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3.69

**SUBTOTAL** of Disbursements This Page (optional) .....

895.01

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 51

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

## **A. Grand Geneva Resort**

Mailing Address 7036 Grand Geneva Way

City Lake Geneva State WI Zip Code 53147

Purpose of Disbursement  
Hotel room rental - not FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.28689

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2897.64

Full Name (Last, First, Middle Initial)

## **B. Heinzen Printing Inc.**

Mailing Address P.O. Box 267

City Marshfield State WI Zip Code 54449

Purpose of Disbursement  
Event invitations - not FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.28770

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1447.33

Full Name (Last, First, Middle Initial)

## **C. M&I Bank of Southern Wisconsin**

Mailing Address P.O. Box 5920

City Madison State WI Zip Code 53705

Purpose of Disbursement  
Bank fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.28687

Date of Disbursement

/   /

Amount of Each Disbursement this Period

73.41

**SUBTOTAL** of Disbursements This Page (optional) .....

4418.38

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** M&I Bank of Southern Wisconsin

Mailing Address P.O. Box 5920

City Madison State WI Zip Code 53705

Purpose of Disbursement

Bank fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.28685

Date of Disbursement

06 / 12 / 2007

Amount of Each Disbursement this Period

35.00

**B.** M&I Bank of Southern Wisconsin

Mailing Address P.O. Box 5920

City Madison State WI Zip Code 53705

Purpose of Disbursement

Bank fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.28771

Date of Disbursement

06 / 12 / 2007

Amount of Each Disbursement this Period

40.00

**C.** M&I Merchant Services

Mailing Address P.O. Box 5920

City Madison State WI Zip Code 53705

Purpose of Disbursement

Credit card processing fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.28693

Date of Disbursement

06 / 11 / 2007

Amount of Each Disbursement this Period

270.87

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

345.87

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

## **A. M&I Merchant Services**

Mailing Address P.O. Box 5920

City Madison State WI Zip Code 53705

Purpose of Disbursement  
credit card processing fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.28767

Date of Disbursement

06 / 11 / 2007

Amount of Each Disbursement this Period

12.95

## **B. Office Max**

Mailing Address 2420 East Springs Dr

City Madison State WI Zip Code 53701

Purpose of Disbursement  
Office supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.28742

Date of Disbursement

06 / 28 / 2007

Amount of Each Disbursement this Period

247.63

## **C. Pitney Bowes Credit Corp**

Mailing Address PO Box 85460

City Louisville State KY Zip Code 40285

Purpose of Disbursement  
Postage meter rental

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.28725

Date of Disbursement

06 / 18 / 2007

Amount of Each Disbursement this Period

783.31

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1043.89

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A. PostMaster</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 7005 City Madison State WI Zip Code 53707 Purpose of Disbursement Business reply mail postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB21B.28686</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 7 Amount of Each Disbursement this Period 500.00
<b>B. PostMaster</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 7005 City Madison State WI Zip Code 53707 Purpose of Disbursement Business reply mail postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB21B.28691</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Amount of Each Disbursement this Period 1000.00
<b>C. PostMaster</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 7005 City Madison State WI Zip Code 53707 Purpose of Disbursement Business reply mail accounting fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB21B.28736</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7 Amount of Each Disbursement this Period 550.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2050.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

## **A. PostMaster**

Mailing Address PO Box 7005

City Madison State WI Zip Code 53707

Purpose of Disbursement  
business reply mail postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.28737

Date of Disbursement

06 / 28 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. Purchase Power**

Mailing Address Po Box 856042

City Louisville State KY Zip Code 40285

Purpose of Disbursement  
Postage meter postage

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.28726

Date of Disbursement

06 / 18 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. QualiTemps Inc.**

Mailing Address PO Box 552

City Madison State WI Zip Code 53701

Purpose of Disbursement  
Temporary employees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.28727

Date of Disbursement

06 / 18 / 2007

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

## **A. Shadow Fax**

Mailing Address 4601 Helfesen Dr

City Madison State WI Zip Code 53718

Purpose of Disbursement

Printer ink

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.28743

Date of Disbursement

06 / 28 / 2007

Amount of Each Disbursement this Period

357.66

## **B. Unisource Direct**

Mailing Address 925 Harrington Drive

City Madison State WI Zip Code 53718

Purpose of Disbursement  
finance rental lists - not FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.28695

Date of Disbursement

06 / 14 / 2007

Amount of Each Disbursement this Period

1110.00

## **C. Unisource Direct**

Mailing Address 925 Harrington Drive

City Madison State WI Zip Code 53718

Purpose of Disbursement  
Fundraising mailing - not FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.28728

Date of Disbursement

06 / 18 / 2007

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2467.66

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

## **A. Unisource Direct**

Mailing Address 925 Harrington Drive

City Madison State WI Zip Code 53718

Purpose of Disbursement  
Fundraising mailing - not FEA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB21B.28744**

Date of Disbursement

06 / 28 / 2007

Amount of Each Disbursement this Period

1000.00

## **B. Wisc. Dept of Revenue - Sls Tax**

Mailing Address PO Box 93389

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement  
Sales/use tax

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB21B.28733**

Date of Disbursement

06 / 28 / 2007

Amount of Each Disbursement this Period

920.33

## **C. WisPolitics.com**

Mailing Address PO Box 2156

City Madison State WI Zip Code 53701

Purpose of Disbursement  
Subscription fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB21B.28745**

Date of Disbursement

06 / 28 / 2007

Amount of Each Disbursement this Period

1200.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3120.33

**TOTAL** This Period (last page this line number only) .....

17341.14

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** AT&T Wisconsin Employee PAC

Mailing Address 722 N Broadway

City  
Milwaukee

State  
WI

Zip Code  
53202

Purpose of Disbursement  
Refund of contribution - see memo text

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.28768

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

500.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** American Funds Service Company

Mailing Address PO Box 6164

City Indianapolis State IN Zip Code 46206

Purpose of Disbursement  
Employee Simple IRA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB30B.28719

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.** American Funds Service Company

Mailing Address PO Box 6164

City Indianapolis State IN Zip Code 46206

Purpose of Disbursement  
Employee Simple IRA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB30B.28739

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.** Lacey Blanchar

Mailing Address 5505 Card Ave

City McFarland State WI Zip Code 53558

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB30B.28698

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) .....

**1561.31**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** Lacey Blanchar

Mailing Address 5505 Card Ave

City State Zip Code  
McFarland WI 53558

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB30B.28746

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
06 / 29 / 2007

Amount of Each Disbursement this Period

190.82

Full Name (Last, First, Middle Initial)

**B.** Dudley Bowlby

Mailing Address 250 Femrite Drive

City State Zip Code  
Madison WI 53716

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB30B.28707

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
06 / 15 / 2007

Amount of Each Disbursement this Period

671.75

Full Name (Last, First, Middle Initial)

**C.** Dudley Bowlby

Mailing Address 250 Femrite Drive

City State Zip Code  
Madison WI 53716

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB30B.28755

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
06 / 29 / 2007

Amount of Each Disbursement this Period

585.60

**SUBTOTAL** of Disbursements This Page (optional) .....

1448.17

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Norman Dawson		<b>Transaction ID:</b> SB30B.28696 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 4 / 2 0 0 7</div> </div>	
Mailing Address PO Box 698		<b>Amount of Each Disbursement this Period</b> <div>66.88</div>	
City Wyocena State WI Zip Code 53969	Purpose of Disbursement Payroll garnishment Candidate Name	<input type="checkbox"/> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Norman Dawson		<b>Transaction ID:</b> SB30B.28738 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 8 / 2 0 0 7</div> </div>	
Mailing Address PO Box 698		<b>Amount of Each Disbursement this Period</b> <div>60.81</div>	
City Wyocena State WI Zip Code 53969	Purpose of Disbursement Payroll garnishment Candidate Name	<input type="checkbox"/> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Dean Care		<b>Transaction ID:</b> SB30B.28735 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 8 / 2 0 0 7</div> </div>	
Mailing Address PO Box 88610		<b>Amount of Each Disbursement this Period</b> <div>291.26</div>	
City Milwaukee State WI Zip Code 53288	Purpose of Disbursement Health insurance Candidate Name	<input type="checkbox"/> Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>418.95</div>	
<b>TOTAL</b> This Period (last page this line number only) .....		<div></div>	

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** Delta Dental

Mailing Address PO Box 828

City State Zip Code  
Stevens Point WI 54481

Purpose of Disbursement  
Dental insurance

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB30B.28734

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 6 / 2 8 / 2 0 0 7

Amount of Each Disbursement this Period

568.66

Full Name (Last, First, Middle Initial)

**B.** Richard Dickie

Mailing Address 126 North Blair Street #1

City State Zip Code  
Madison WI 53703

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB30B.28708

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 6 / 1 5 / 2 0 0 7

Amount of Each Disbursement this Period

1069.92

Full Name (Last, First, Middle Initial)

**C.** Richard Dickie

Mailing Address 126 North Blair Street #1

City State Zip Code  
Madison WI 53703

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB30B.28756

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 6 / 2 9 / 2 0 0 7

Amount of Each Disbursement this Period

1062.89

**SUBTOTAL** of Disbursements This Page (optional) .....

2701.47

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Jason Gammeter		<b>Transaction ID:</b> SB30B.28709 <b>Date of Disbursement</b> <div> <div>06</div> <div>15</div> <div>2007</div> </div>
Mailing Address 367 East Monroe St		<b>Amount of Each Disbursement this Period</b> <div>267.52</div>
City Wyocena State WI Zip Code 53969	<div>Category/Type</div>	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Jason Gammeter		<b>Transaction ID:</b> SB30B.28757 <b>Date of Disbursement</b> <div> <div>06</div> <div>29</div> <div>2007</div> </div>
Mailing Address 367 East Monroe St		<b>Amount of Each Disbursement this Period</b> <div>243.26</div>
City Wyocena State WI Zip Code 53969	<div>Category/Type</div>	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Donna Heimbach		<b>Transaction ID:</b> SB30B.28710 <b>Date of Disbursement</b> <div> <div>06</div> <div>15</div> <div>2007</div> </div>
Mailing Address 3002 Dianne Drive		<b>Amount of Each Disbursement this Period</b> <div>340.79</div>
City Middleton State WI Zip Code 53562	<div>Category/Type</div>	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**851.57**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Donna Heimbach		<b>Transaction ID:</b> SB30B.28758 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 7</div> </div>	
Mailing Address 3002 Dianne Drive		<b>Amount of Each Disbursement this Period</b> <div>239.67</div>	
City Middleton	State WI		Zip Code 53562
Purpose of Disbursement Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) IRS		<b>Transaction ID:</b> SB30B.28697 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 4 / 2 0 0 7</div> </div>	
Mailing Address Payment Center		<b>Amount of Each Disbursement this Period</b> <div>362.60</div>	
City Kansas City	State MO		Zip Code 64999
Purpose of Disbursement Payroll tax - late penalty			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) IRS		<b>Transaction ID:</b> SB30B.28717 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 7</div> </div>	
Mailing Address Payment Center		<b>Amount of Each Disbursement this Period</b> <div>5531.68</div>	
City Kansas City	State MO		Zip Code 64999
Purpose of Disbursement Payroll taxes			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>6133.95</div>	
<b>TOTAL</b> This Period (last page this line number only) .....			

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

A. Full Name (Last, First, Middle Initial)  
IRS

Mailing Address Payment Center

City State Zip Code  
Kansas City MO 64999

Purpose of Disbursement

Payroll taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.28765

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
06 / 29 / 2007

Amount of Each Disbursement this Period

5427.02

B. Full Name (Last, First, Middle Initial)  
Mark Jefferson

Mailing Address 1678 Cottonville Avenue

City State Zip Code  
Arkdale WI 54613

Purpose of Disbursement

Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.28699

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
06 / 15 / 2007

Amount of Each Disbursement this Period

2145.85

C. Full Name (Last, First, Middle Initial)  
Mark Jefferson

Mailing Address 1678 Cottonville Avenue

City State Zip Code  
Arkdale WI 54613

Purpose of Disbursement

Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB30B.28747

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
06 / 29 / 2007

Amount of Each Disbursement this Period

2145.84

SUBTOTAL of Disbursements This Page (optional) .....

9718.71

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Juston Johnson		<b>Transaction ID:</b> SB30B.28700 <b>Date of Disbursement</b> <div> <div>06</div> <div>15</div> <div>2007</div> </div>	
Mailing Address 820 Williamson Street		<b>Amount of Each Disbursement this Period</b> <div>1308.66</div>	
City Madison	State WI		Zip Code 53703
Purpose of Disbursement Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Juston Johnson		<b>Transaction ID:</b> SB30B.28748 <b>Date of Disbursement</b> <div> <div>06</div> <div>29</div> <div>2007</div> </div>	
Mailing Address 820 Williamson Street		<b>Amount of Each Disbursement this Period</b> <div>1320.67</div>	
City Madison	State WI		Zip Code 53703
Purpose of Disbursement Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Kyle Johnson		<b>Transaction ID:</b> SB30B.28701 <b>Date of Disbursement</b> <div> <div>06</div> <div>15</div> <div>2007</div> </div>	
Mailing Address 210 N Charter #504		<b>Amount of Each Disbursement this Period</b> <div>257.96</div>	
City Madison	State WI		Zip Code 53715
Purpose of Disbursement Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**2887.29**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Kyle Johnson		<b>Transaction ID:</b> SB30B.28749 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 7</div> </div>	
Mailing Address 210 N Charter #504		<b>Amount of Each Disbursement this Period</b> <div>264.55</div>	
City Madison State WI Zip Code 53715	Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Brian Kind		<b>Transaction ID:</b> SB30B.28702 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 7</div> </div>	
Mailing Address 6403 Alison Ln		<b>Amount of Each Disbursement this Period</b> <div>1620.89</div>	
City Madison State WI Zip Code 53711	Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Brian Kind		<b>Transaction ID:</b> SB30B.28750 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 7</div> </div>	
Mailing Address 6403 Alison Ln		<b>Amount of Each Disbursement this Period</b> <div>1620.91</div>	
City Madison State WI Zip Code 53711	Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>3506.35</div>	
<b>TOTAL</b> This Period (last page this line number only) .....		<div></div>	

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Kirsten Kukowski		<b>Transaction ID:</b> SB30B.28703 <b>Date of Disbursement</b> <div> <div>06</div> <div>15</div> <div>2007</div> </div>
Mailing Address 3029 Maple Valley Drive #201		<b>Amount of Each Disbursement this Period</b> <div>1220.25</div>
City Madison State WI Zip Code 53719	<div>Category/Type</div>	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Kirsten Kukowski		<b>Transaction ID:</b> SB30B.28751 <b>Date of Disbursement</b> <div> <div>06</div> <div>29</div> <div>2007</div> </div>
Mailing Address 3029 Maple Valley Drive #201		<b>Amount of Each Disbursement this Period</b> <div>1153.27</div>
City Madison State WI Zip Code 53719	<div>Category/Type</div>	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Larry Loomis		<b>Transaction ID:</b> SB30B.28711 <b>Date of Disbursement</b> <div> <div>06</div> <div>15</div> <div>2007</div> </div>
Mailing Address 3157 Muir Field Road #47		<b>Amount of Each Disbursement this Period</b> <div>438.84</div>
City Madison State WI Zip Code 53719	<div>Category/Type</div>	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**2812.36**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Larry Loomis		<b>Transaction ID:</b> SB30B.28759 <b>Date of Disbursement</b> <div> <div>06</div> <div>29</div> <div>2007</div> </div>	
Mailing Address 3157 Muir Field Road #47		<b>Amount of Each Disbursement this Period</b> <div>415.67</div>	
City Madison	State WI		Zip Code 53719
Purpose of Disbursement Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) M&I Bank of Southern Wisconsin		<b>Transaction ID:</b> SB30B.28723 <b>Date of Disbursement</b> <div> <div>06</div> <div>18</div> <div>2007</div> </div>	
Mailing Address P.O. Box 5920		<b>Amount of Each Disbursement this Period</b> <div>205.03</div>	
City Madison	State WI		Zip Code 53705
Purpose of Disbursement Interest on LOC			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Kathryn Mize		<b>Transaction ID:</b> SB30B.28704 <b>Date of Disbursement</b> <div> <div>06</div> <div>15</div> <div>2007</div> </div>	
Mailing Address 414 N Livingston Street #2		<b>Amount of Each Disbursement this Period</b> <div>1726.26</div>	
City Madison	State WI		Zip Code 53703
Purpose of Disbursement Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) .....

**2346.96**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Kathryn Mize		<b>Transaction ID:</b> SB30B.28752 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 7</div> </div>
Mailing Address 414 N Livingston Street #2		<b>Amount of Each Disbursement this Period</b> <div>1730.74</div>
City Madison State WI Zip Code 53703		
Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Jeffery Noltner		<b>Transaction ID:</b> SB30B.28712 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 7</div> </div>
Mailing Address 1543 Langley Lane		<b>Amount of Each Disbursement this Period</b> <div>63.30</div>
City Madison State WI Zip Code 53718		
Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Jeffery Noltner		<b>Transaction ID:</b> SB30B.28760 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 7</div> </div>
Mailing Address 1543 Langley Lane		<b>Amount of Each Disbursement this Period</b> <div>54.81</div>
City Madison State WI Zip Code 53718		
Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1848.85</div>
<b>TOTAL</b> This Period (last page this line number only) .....		



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** Sherrie Osegard

Mailing Address 2346 Talc Trail #208

City Madison State WI Zip Code 53719

Purpose of Disbursement

Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB30B.28705

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
06 / 15 / 2007

Amount of Each Disbursement this Period

970.31

Full Name (Last, First, Middle Initial)

**B.** Sherrie Osegard

Mailing Address 2346 Talc Trail #208

City Madison State WI Zip Code 53719

Purpose of Disbursement

Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB30B.28753

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
06 / 29 / 2007

Amount of Each Disbursement this Period

970.31

Full Name (Last, First, Middle Initial)

**C.** Scott Poole

Mailing Address 445 West Gilman #202

City Madison State WI Zip Code 53703

Purpose of Disbursement

Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB30B.28713

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
06 / 15 / 2007

Amount of Each Disbursement this Period

296.10

**SUBTOTAL** of Disbursements This Page (optional) .....

2236.72

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Scott Poole		<b>Transaction ID:</b> SB30B.28761 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 7</div> </div>
Mailing Address 445 West Gilman #202		<b>Amount of Each Disbursement this Period</b> <div>256.59</div>
City Madison State WI Zip Code 53703		
Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Karoline Rezin		<b>Transaction ID:</b> SB30B.28706 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 7</div> </div>
Mailing Address 1836 Gruman		<b>Amount of Each Disbursement this Period</b> <div>1077.89</div>
City Tomah State WI Zip Code 54660		
Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Karoline Rezin		<b>Transaction ID:</b> SB30B.28754 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 7</div> </div>
Mailing Address 1836 Gruman		<b>Amount of Each Disbursement this Period</b> <div>1061.83</div>
City Tomah State WI Zip Code 54660		
Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>2396.31</div>
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) James Sanders		<b>Transaction ID:</b> SB30B.28714 <b>Date of Disbursement</b> <div> <div>06</div> <div>15</div> <div>2007</div> </div>	
Mailing Address 4510 Texas Trail		<b>Amount of Each Disbursement this Period</b> <div>620.92</div>	
City Madison	State WI		Zip Code 53704
Purpose of Disbursement Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) James Sanders		<b>Transaction ID:</b> SB30B.28762 <b>Date of Disbursement</b> <div> <div>06</div> <div>29</div> <div>2007</div> </div>	
Mailing Address 4510 Texas Trail		<b>Amount of Each Disbursement this Period</b> <div>500.82</div>	
City Madison	State WI		Zip Code 53704
Purpose of Disbursement Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Charles Triller		<b>Transaction ID:</b> SB30B.28715 <b>Date of Disbursement</b> <div> <div>06</div> <div>15</div> <div>2007</div> </div>	
Mailing Address 609 East Gorham St #14		<b>Amount of Each Disbursement this Period</b> <div>557.19</div>	
City Madison	State WI		Zip Code 53703
Purpose of Disbursement Payroll			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) .....

**1678.93**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

<b>A.</b> Full Name (Last, First, Middle Initial) Charles Triller		<b>Transaction ID:</b> SB30B.28763 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 7</div> </div>
Mailing Address 609 East Gorham St #14		<b>Amount of Each Disbursement this Period</b> <div>613.18</div>
City Madison State WI Zip Code 53703		
Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Joshua Wilson		<b>Transaction ID:</b> SB30B.28716 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 7</div> </div>
Mailing Address 641 West Main Street		<b>Amount of Each Disbursement this Period</b> <div>438.30</div>
City Madison State WI Zip Code 53703		
Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Joshua Wilson		<b>Transaction ID:</b> SB30B.28764 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 9 / 2 0 0 7</div> </div>
Mailing Address 641 West Main Street		<b>Amount of Each Disbursement this Period</b> <div>504.34</div>
City Madison State WI Zip Code 53703		
Purpose of Disbursement Payroll	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1555.82

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A.** Wisc. Dept of Revenue

Mailing Address PO Box 93208

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement

Payroll taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB30B.28718

Date of Disbursement

06 / 15 / 2007

Amount of Each Disbursement this Period

1087.94

Full Name (Last, First, Middle Initial)

**B.** Wisc. Dept of Revenue

Mailing Address PO Box 93208

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement

Payroll taxes

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB30B.28732

Date of Disbursement

06 / 28 / 2007

Amount of Each Disbursement this Period

339.19

Full Name (Last, First, Middle Initial)

**C.** Wisc. Dept of Revenue

Mailing Address PO Box 93208

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement

Payroll

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB30B.28766

Date of Disbursement

06 / 29 / 2007

Amount of Each Disbursement this Period

1064.20

**SUBTOTAL** of Disbursements This Page (optional) .....

2491.33

**TOTAL** This Period (last page this line number only) .....

46595.05

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Transaction ID: SC/10.6376

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

M&amp;I Bank of Southern Wisconsin

Mailing Address P.O. Box 5920

City Madison

State WI

ZIP Code 53705

Election:

☐ Primary☐ General☐ Other (specify) ▼

Original Amount of Loan

110000.00

Cumulative Payment To Date

106000.00

Balance Outstanding at Close of This Period

4000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 1D D  
0 9Y Y Y Y  
2 0 0 2

04/30/02

5.75 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

4000.00

**TOTALS** This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 47 / 51

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)  
Republican Party of Wisconsin

Transaction ID: SC/10.10726

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

M&amp;I Bank of Southern Wisconsin

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address P.O. Box 5920

City Madison

State WI

ZIP Code 53705

Original Amount of Loan

34000.00

Cumulative Payment To Date

10300.00

Balance Outstanding at Close of This Period

23700.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
1 2D D  
3 1Y Y Y Y  
2 0 0 3

5.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

23700.00

**TOTALS** This Period (last page in this line only) ▶

27700.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 48 / 51

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A. Full Name (Last, First, Middle Initial)**

GFC Leasing

Mailing Address

PO Box 1129

City	State	Zip Code
Madison	WI	53701

Purpose of Disbursement:  
Copier leaseCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

51646.88

Date 06 / 07 / 2007

Transaction ID: H4.28688

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

118.29

444.99

563.28

**B. Full Name (Last, First, Middle Initial)**

AT&amp;T

Mailing Address

PO Box 9001309

City	State	Zip Code
Louisville	KY	40290-1309

Purpose of Disbursement:  
Long distanceCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

53214.81

Date 06 / 18 / 2007

Transaction ID: H4.28721

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

329.27

1238.66

1567.93

**C. Full Name (Last, First, Middle Initial)**

Coca-Cola Bottling Company

Mailing Address

PO Box 86

City	State	Zip Code
Minneapolis	MN	55486

Purpose of Disbursement:  
Office sodaCategory/  
TypeActivity or Event Identifier:  
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

53323.85

Date 06 / 18 / 2007

Transaction ID: H4.28722

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

22.90

86.14

109.04

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

470.46

1769.79

2240.25

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 49 / 51

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A. Full Name (Last, First, Middle Initial)**  
Neenah Springs

Mailing Address

PO Box 9

City	State	Zip Code
Oxford	WI	53952

Purpose of Disbursement:  
Bottled waterCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

53368.66

Date 06 / 18 / 2007

Transaction ID: H4.28724

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

9.41

35.40

44.81

**B. Full Name (Last, First, Middle Initial)**  
Roto Rooter Sewer Service

Mailing Address

4808 Ivywood Trl

City	State	Zip Code
McFarland	WI	53588

Purpose of Disbursement:  
PlumbingCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

53568.66

Date 06 / 19 / 2007

Transaction ID: H4.28729

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

42.00

158.00

200.00

**C. Full Name (Last, First, Middle Initial)**  
TDS Metrocom

Mailing Address

PO Box 1010

City	State	Zip Code
Monroe	WI	53566

Purpose of Disbursement:  
Phone billCategory/  
TypeActivity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

54423.48

Date 06 / 19 / 2007

Transaction ID: H4.28730

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

179.51

675.31

854.82

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

230.92

868.71

1099.63

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 50 / 51  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

**A. Full Name (Last, First, Middle Initial)**  
 West Bend Mutual Insurance

Mailing Address

1900 South 18th Ave

City	State	Zip Code
West Bent	WI	53095

Purpose of Disbursement:  
 Building insurance

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

54780.48

Date 

M	M
0	6

 / 

D	D
2	8

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4.28731

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.97		282.03		357.00

**B. Full Name (Last, First, Middle Initial)**  
 Earthscapes

Mailing Address

PO Box 683

City	State	Zip Code
Marshall	WI	53559

Purpose of Disbursement:  
 Snow removal

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

55565.48

Date 

M	M
0	6

 / 

D	D
2	8

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4.28740

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
164.85		620.15		785.00

**C. Full Name (Last, First, Middle Initial)**  
 MG&E

Mailing Address

PO Box 1231

City	State	Zip Code
Madison	WI	53701

Purpose of Disbursement:  
 Energy bill

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

56898.31

Date 

M	M
0	6

 / 

D	D
2	8

 / 

Y	Y	Y	Y
2	0	0	7

Transaction ID: H4.28741

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
279.89		1052.94		1332.83

## **SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
519.71		1955.12		2474.83

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
1221.09	4593.62	5814.71

Image# 27930969032

Form/Schedule: **SB29** This disbursement is to return a contribution from a state PAC accidentally deposited into our federal account  
Transaction ID: **SB29.28768** as disclosed in the June Monthly report.

Form/Schedule: **SC/10** On 12/30/02, we made a \$25,000 draw on our line of credit. It is shown as an accrual under the loan payments.  
Transaction ID: **SC/10.6376** FEC Tech Support has advised this procedure to show a draw on the line of credit

\*\*\*\*\*